

PTO/SB/53 (12-97)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION BY THE INVENTOR, OFFER TO SURRENDER PATENT

Docket Number (Optional) 1860/48111RE

OFFE	K 10 SURRENDER PATEI	IN I					
	application for a reissue patent ba	ased on the original patent identified below.					
Name of Patentee(s)	Brandhorst et al.						
Patent Number	5,653,360	Date Patent Issued August 5, 1997					
Title of Invention	Device For Emptying A Fi						
I am the inventor of the original patent.							
I offer to surrender the original patent.							
1. X Filed herein is a certificate under 37 CFR 3.73(b).							
2. Ownership of the patent is in the inventor(s), and no assignment of the patent has been made.							
One of boxes 1 or 2	2 above must be checked.	•					
The written consent of all assignees owning an undivided interest in the original patent is included in this application for reissue.							
Signature Send Sull	I way James	Vall Prolle					
Typed or printed name							
Gerd Brandhorst, Wolf-Dietrich Herold, Ralf Heiduczek The assignee Owning an Undivided interest in said original patent is							
The assignee owning an undivided interest in said original patent is <u>ESPE Dental AG</u> and the assignee consents to the accompanying application for reissue.							
statements made or were made with the fine or imprisonment	n information and belief are believ knowledge that willful false state t, or both, under 18 U.S.C. 1001 ity of the application, any patent is	my own knowledge are true and that all ved to be true; and further that these statements ements and the like so made are punishable by and that such willful false statements may issued thereon, or any patent to which this					
Name of assignee	///						
ESPE Dental A							
Signature of person		October 26, 1999					
Typed/or printed nam	ne and title of person signing for a	assignee					
Div. Reinhold Nowak, Head Intellectual Property Dept							

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE INVEI			NTOR, page 2) Docket Number (Option 1860/48111RE			
applicant. As a	eted in this reissue application aros named inventor, I hereby appoint t and transact all business in the Pat	the follow	wing attorne	ev(s) and/or	agent(s) to prosecute	
Name(s)	Registration No		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	70	Solo incremin	
		•		NOV 0 2	1999	
				(S.		
Correspondence	Address Dissets II as a second of			Cay & vp or		
Correspondence Address: Direct all communications about the application to: Place Customer Number Bar						
Customer Nu	Type Customer Number h	ere	\rightarrow		abel here	
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Country	United States	J	Otate	2.0.	217 20003	
Telephone	202-628-8800		Fax	202-628-	991.1.	
application, any pat		hich this	its may jeopa declaration i	ardize the vali	dity of the	
Residence	fred frolly					
D-868	99 Landsberg	Date	oc cope	11, 1999)	
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Full name of second joint inventor (given name, family name) Wolf-Dietrich Herold						
Inventor's signature Wif-D. framed Date 124 Oct 1998					1999	
Residence D-82229 Seefeld			Citizenship German			
	D-82229 Seefeld					
	nt inventor (given name, family name)					
Ralf Heighczek Date October 22, 1999						
Residence D-83183 Bischofswiesen			October 22, 1999 Citizenship German			
Post Office Address Klausweg 2, D-83183 Bischofswiesen						
_	nventors are named on separately num	nbered s	heets attach	ed hereto.		

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Docket Number (Optional)

REISSUE APPLICATION DECLARATION BY THE INVENTOR

960/69111BE

1860/48111RE
As a below named inventor, I hereby declare that: My residence, post office address and citizenship are stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number
the specification of which
is attached hereto.
was filed on <u>August 5, 1999</u> as reissue application number <u>09 / 368,505</u> and was amended on (If applicable)
I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)
by reason of a defective specification or drawing.
by reason of the patentee claiming more or less than he had the right to claim in the patent.
by reason of other errors.
At least one error upon which reissue is based is described as follows: Original independent claims 1 and 4 of the patent recite that the housing is "cylindrical" housing and "said housing having an inner diameter and including an end portion havig a ring support surface, the cap having a dispensing opening, an annular engaging portion surrounding the dispensing opening and cooperating with said ring for sealing the dispensing end of the tube, and a cylindrical end portion adapted to engage the end portion of the housing, said ring having a peripheral portion which exceeds the inner diameter of the housing for engaging said ring supporting surface"
These recitations render the original patent wholly or partly inoperative by reason of the patentee claiming less than what the patentee was entitled to as patentee is entitled to broader claims not including the limitations set forth in these recitations.

[Page 1 of 2]

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Docket Number (Optional) (REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2) 1860/48111RE All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Registration Number Name(s) Correspondence Address: Direct all communications about the application to: Place Customer Number Bar Customer Number Code Label here Type Customer Number here OR Firm or X Individual Name Evenson, McKeown, Edwards & Lenahan, P.L.L.C. Address Suite 700 Address 1200 G Street, N.W. City ZIP 20005 State D.C. Washington, Country United States Telephone Fax 202-628-8844 202-628-8800 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed. Full name of sole or first inventor (given name, family name) Gerd Bradhorst Inventor's signature Residence D-86899 Landsberg Date October 11, 1999 Citizenship German Rost Office Addrestrasse 14, D-86899 Landsberg Full name of second joint inventor (given name, family name) Wolf-Dietrich Herold Inventor's signature 4 Oct. 19 Residence — Citizenship German D-82229 Seefel& Post Office Address Hoehenweg 13, D-82229 Seefeld Full name of third joint inventor (given name, family name) Ralf Heiduczek Inventor's signature Date October 22, 1999 Residence Citizenship D-83183 Bischofswiesen German Post Office Address Klausweg 2, D-83183 Bischofswiesen Additional joint inventors are named on separately numbered sheets attached hereto.